

FOR OFFICE USE ONLY

Registration# _____

Inspector _____



DEPARTMENT OF MINES MINERALS AND ENERGY

DIVISION OF GAS AND OIL

P.O. BOX 1416
ABINGDON, VA 24210
(276) 676-5423

REGISTRATION FORM FOR DRILLERS, OWNERS AND OPERATORS OF GEOTHERMAL WELLS

Pursuant to 45.1-179.7 of the Code of Virginia, the undersigned submits the following registration data for the party named below:

1. COMPANY _____
ADDRESS _____
TELEPHONE _____
2. PLAN OF ORGANIZATION (STATE WHETHER AN INDIVIDUAL, PARTNERSHIP, JOINT VENTURE, CORPORATION, ETC.) _____
3. REGISTRANT'S BUSINESS ACTIVITIES REQUIRING REGISTRATION:
_____ To drill wells wholly or partly owned by oneself
_____ To drill wells for others on contract
_____ To own wells
_____ To operate wells wholly or partly owned by oneself
_____ To operate wells for others on contract
4. IF A FOREIGN CORPORATION, (A) FURNISH PLACE AND DATE OF INCORPORATION, AND (B) DATE OF CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN VIRGINIA.
(A) _____
(B) _____
5. PERSON IN CHARGE OF OPERATIONS IN VIRGINIA:
Name _____ Title _____
Address _____ Telephone _____
6. DESIGNATED AGENT:
Name _____ Title _____
Address _____ Telephone _____

NAME OF APPLICANT _____

SIGNATURE'S TITLE _____

DATE _____